EF-264-AH-R13-0522-58000082-1

BOE-264-AH (P1) REV. 13 (05-22)

## **COLLEGE EXEMPTION CLAIM**

THE REST

Stephen S. Duckels Yuba County Assessor 915 8th Street, Suite 101

915 8th Street, Suite 101 Marysville, CA 95901-5273 Phone: (530) 749-7820

 $\square$  OWN

This claim is filed for fiscal year 20	- 20
(Example: a person filing a t imely claim	in January 201
would enter "2011-2012 ")	

This claim must be filed by 5:00 p.m., Feb	oruary 15.		
CLAIMANT NAME AND MAILING ADDRESS	and mailing address)	FOR ASSESS	OR'S USE ONLY
(Make necessary corrections to the printed name	and mailing address) –	Received by	ssor's designee)
		(Asses	ssor s aesignee)
		of(cc	ounty or city)
		on	
L	-	]   "	(date)
If you no longer seek an exemption at this lo	cation, check here  Sign and re	turn this form to the Assessor. D	late vacated:
		Man and form to any reconstrict	ato vacated
NAME OF CLAIMANT			
TITLE OF CLAIMANT			DAYTIME TELEPHONE NUMBER
CORPORATE NAME OF THE COLLEGE			
ADDRESS (Street, City, County, State, Zip Code)	^ A A		
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPER	RTY WAS FIRST USED BY CLAIMANT
Owner and operator: (check applicable bo	oxes)		_ :
Claimant is:		nly	
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal prop	perty
2. Does the above institution qualify as a col	lege or seminary of learning under	the laws of the State of Californi	a?
YES NO			
3. Is the institution conducted as a non-profi	t entity?	V	
4. Does the institution require for regular add	mission the completion of a four-ye	ear high school course or its equiv	valent?
			of at lacet to a consist library last
<ol><li>Does the institution confer upon its gradua and sciences, or on a course of at least th</li></ol>			
veterinary medicine, pharmacy, architectu			
YES NO			
6. Is the property for which the exemption is	claimed used <b>exclusively</b> for the	purposes of education?	
YES NO			
<ol><li>List all buildings and other improvements sheet if necessary. Indicate whether lease</li></ol>			
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE	
			☐ LEASE ☐ OWN
			□ LEASE □ OWN
			□ LEASE □ OWN
			□ LEASE □ OWN
			☐ LEASE ☐ OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM